

Supplemental Application Data Sheet**Application Information**

Application number:: ~~Concurrently Herewith~~ 10/622,800
Filing Date:: July 18, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: ~~Not Yet Assigned~~ 3739
CD-ROM or CD-R?:: None
Sequence submission?:: No
Computer Readable Form (CRF)?:: No
Title:: DEVICES AND METHODS FOR COOLING
MICROWAVE ANTENNAS
Attorney Docket Number:: 412692001700
Request for Early Publication?:: No
Request for Non-Publication?:: No
Total Drawing Sheets:: 26
Small Entity?:: ~~No~~ Yes
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Roman
Family Name:: TUROVSKIY
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 240 N. Lake Merced Hills
City of mailing address:: San Francisco
State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94132

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Steven
Family Name:: KIM
City of Residence:: Los Altos
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 2029 Crist Drive
City of mailing address:: Los Altos
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94026

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Mani
Family Name:: PRAKASH
City of Residence:: Campbell
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 576 Virginia Avenue
City of mailing address:: Campbell
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 95008

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Italy
Status:: Full Capacity
Given Name:: Francesca

Family Name:: ROSSETTO
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 8 Locksley Avenue, Apt. 9B
City of mailing address:: San Francisco
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94122

Correspondence Information

Correspondence Customer Number:: 25226 20872

Representative Information

Representative Customer Number:: 25226 20872

Assignee Information

Assignee name:: VIVANT MEDICAL, INC.
1916-A Old Middlefield Way
Mountain View, California 94043